FIELD NO.	RECORD POSITION(S)			FIELD NAME AND DESCRIPTION (BLANK)	
1-6.	1-56	56	-		
6.	57	1	N	AME	NDMENT TYPE
				CODE	<u>AMENDMENT</u>
				1	No matching Birth Certificate located. Reco
				2	No Death Certificate located or late match.
				3	Cohort record amended Other Amendment (Including registration,
				3	reporting, and coding errors)
				BLANK	No Amendment made
7.	58	1	N	SEX (OF CHILD
				CODE	SEX
				1	MALE
				2	FEMALE
				9	UNDETERMINED SEX
8.	59-60	2	-	(BLA	NK)
9.	61	1	N 	TYPE	E OF BIRTH
				<u>CODE</u>	<u>TYPE</u>
				1	SINGLE
				2	TWIN
				3	TRIPLET
				4	QUADRUPLET
				5 6	QUINTUPLET SEXTUPLET
				7	SETTUPLET
				8	OCTUPLET
				9	UNKNOWN OR UNREPORTED
10.	62	1	N	BIRT	H ORDER
				CODE	<u>ORDE</u> R
				1	FIRST BORN
				2	SECOND BORN
				3	THIRD BORN
				4	FOURTH BORN
				5	FIFTH BORN
				6	SIXTH BORN
				7	SEVENTH BORN

FIELD NO.	RECORD POSITION(S)		ALPHA/ NUMERIC	FIELD NAME AND DESCRIPTION		
				8 EIGTH BORN 9 UNKNOWN OR UNREPORTED		
11.	63-66	4	N	BIRTHWEIGHT (GRAMS)		
				4 DIGIT NUMERIC 9998 = NOT WEIGHED (HOSPITAL BIRTH) 9999 = NOT STATED (NON-HOSPITAL BIRTH)		
12.	67-73	7	N	DATE OF BIRTH (CYYMMDD)		
				C = CENTURY CODE 9 ONLY YY = YEAR CODE 99 (FOR 1999) MM = MONTH CODES 01-12 (JAN-DEC) DD = DAY CODES 01-31		
13. 74-77		4	N	MATERNITY HOSPITAL CODE (APPENDIX A: <u>California Maternity Hospital Codes</u> 1960-1999, UC Santa Barbara, January 1999)		
				4 DIGIT NUMERIC 0000 = NON-HOSPITAL BIRTH 0998 = BIRTHS IN TRANSIT 0999 = UNKNOWN OR NEW HOSPITAL 9999 = OUT-OF-STATE HOSPITAL BIRTH		
14.	78	1	-	(BLANK)		
15.	79-80	2	A	BIRTH COUNTY/PLACE		
		CALIFORNIA COUNTY CODES:				
01 = ALAMEDA 02 = ALPINE 03 = AMADOR 04 = BUTTE 05 = CALAVERAS 06 = COLUSA 07 = CONTRA COSTA 08 = DEL NORTE 09 = EL DORADO 10 = FRESNO 11 = GLENN 12 = HUMBOLDT 13 = IMPERIAL 14 = INYO 15 = KERN				31 = PLACER 32 = PLUMAS 33 = RIVERSIDE 34 = SACRAMENTO 34 = SACRAMENTO 35 = SAN BENITO 36 = SAN BERNARDINO 37 = SAN DIEGO 38 = SAN FRANCISCO 39 = SAN JOAQUIN 40 = SAN LUIS OBISPO 41 = SAN MATEO 42 = SANTA BARBARA 44 = SANTA CLARA 44 = SANTA CRUZ 45 = SHASTA		

	RECORD POSITION(S)			FIELD NAME AND DESCRIPTION		
		BIRTH PLACE CODES U.S. STATES (EXCLUDING CA), TERRITORIES, FOREIGN COUNTRIES:				
AK =	ALASKA	IN = INDIANA		NH = NEW HAMPSHIRE	VA = VIRGINIA	
AL =	ALABAMA	KS = KAN	SAS	NJ = NEW JERSEY	VT = VERMONT	
AR =	ARKANSAS	KY = KEN	TUCKY	NM = NEW MEXICO	WA = WASHINGTON	
AZ =	ARIZONA	LA = LOU	ISIANA	NV = NEVADA	WI = WISCONSIN	
CO =	COLORADO	MA = MA	SSACHUSETTS	NY = NEW YORK	WV = WEST VIRGINIA	
	CONNECTICUT	MD = MA		OH = OHIO	WY = WYOMING	
DC =	DIST. OF	ME = MAI		OK = OKLAHOMA		
	COLUMBIA	MI = MICI		OR = OREGON	91 = CANADA	
	DELAWARE	MN = MIN		PA = PENNSYLVANIA	92 = MEXICO	
	FLORIDA	MO = MIS		RI = RHODE ISLAND	93 = OTHER	
	GEORGIA	MS = MISS		SC = SOUTH CAROLINA	COUNTRIES	
	HAWAII	MT = MOI		SD = SOUTH DAKOTA	94 = GUAM	
	IOWA	NB = NEB		TN = TENNESSEE	95 = PUERTO RICO	
	IDAHO ILLINOIS	NC = NORTH CAROLINA ND = NORTH DAKOTA			96 = VIRGIN ISLANDS 97 = CUBA	
1L – 1	ILLINOIS	ND - NON	THDAKOTA	01 – 01AII	91 – COBA	
16-17	7. 81-97	17	-	(BLANK)		
18.	98-99	2	A	BIRTHPLACE OF MO	ГНЕК	
	ALASKA	KS = KA		NV =NEVADA	WY = WYOMING	
	ALABAMA		NTUCKY			
	ARKANSAS	LA = LOU		011 01110	PR = PUERTO RICO	
	ARIZONA		SSACHUSETTS			
	CALIFORNIA		ARYLAND	OR = OREGON	GU = GUAM	
	COLORADO	ME = MA		PA = PENNSYLVANIA		
	CONNECTICUT DISTRICT OF		CHIGAN NNESOTA	RI = RHODE ISLAND SC = SOUTH CAROLINA	JA = JAPAN VN = VIETNAM	
DC =	COLUMBIA	MO = MI		SD = SOUTH DAKOTA	PI = PHILIPPINES	
DF -	DELAWARE		SSISSIPPI	TN = TENNESSEE	CN = CANADA	
	FLORIDA	MT = MC		TX = TEXAS	CU = CUBA	
	GEORGIA	NB = NEI		UT = UTAH	MX = MEXICO	
	HAWAII		RTH CAROLINA	VA = VIRGINIA	RE = REST OF WORLD	
	IOWA		RTH DAKOTA	VT = VERMONT	NA = UNKNOWN	
	IDAHO		W HAMPSHIRE	WA = WASHINGTON		
	ILLINOIS		V JERSEY	WI = WISCONSIN		
IN = 1	INDIANA	NM = NE	W MEXICO	WV = WEST VIRGINIA		
19.	100-101	2	N	AGE OF MOTHER		
				2 DIGIT NUMERIC		
				OO LINIZMOUZNI OD LINI	DEDODEED	

2 DIGIT NUMERIC 99 = UNKNOWN OR UNREPORTED

FIELD NO.		NO. OF BYTES			
20.	102-103	2	N	MOTHER'S YEAR	RS OF EDUCATION
				13 1 YEAR OF 14 2 YEARS C 15 3 YEARS C 16 4 YEARS C 17 5+ YEARS	ATION ARY OR SECONDARY F COLLEGE OF COLLEGE OF COLLEGE OF COLLEGE
21.	104-105	2	N	RACE-ETHNICIT	Y OF MOTHER
10 = WHITE 20 = BLACK 30 = AMERICAN INDIAN 40 = ASIAN-UNSPECIFIED 41 = ASIAN-SPECIFIED 42 = ASIAN-CHINESE 43 = ASIAN-JAPANESE 44 = ASIAN-KOREAN 45 = ASIAN-VIETNAMESE)	47 = ASIAN-THAI 48 = ASIAN-LAOTIAN 51 = OTHER-SPECIFIED 52 = INDIAN (EXCL. AMER INDIAN, ALEUT & ESKIMO) 53 = FILIPINO		55 = GUAMANIAN 56 = SAMOAN 57 = ESKIMO 58 = ALEUT 59 = PACIFIC ISLANDER (EXCL. HAWAIIAN, GUAMANIAN, SAMOAN) 98 = REFUSED TO STATE 99 = UNKNOWN
22. 23.	106 107-108	1 2	- A		CE OF RESIDENCE
01 = ALAMEDA 02 = ALPINE 03 = AMADOR 04 = BUTTE 05 = CALAVERAS 06 = COLUSA 07 = CONTRA COSTA 08 = DEL NORTE 09 = EL DORADO 10 = FRESNO 11 = GLENN 12 = HUMBOLDT 13 = IMPERIAL 14 = INYO 15 = KERN		16 = KIN 17 = LA 18 = LA 19 = LO 20 = MA 21 = MA 22 = MA 23 = ME 24 = ME 25 = MC 26 = MC	NGS KE SSEN S ANGELES ADERA ARIN ARIPOSA ENDOCINO ERCED DOC DNO DNTEREY PA VADA		52 = TEHAMA 53 = TRINITY 54 = TULARE 55 = TUOLUMNE 56 = VENTURA

FIELD NO.	RECORD POSITION(S)	NO. OF BYTES	ALPHA/ NUMERIC		IELD NAME AND DESCRIPTION	
			R'S PLACE OF I			EIGN COUNTRIES:
AK =	ALASKA	IN = INDIANA	\ \	NH = NEW	HAMPSHIRE	VA = VIRGINIA
AL =	ALABAMA	KS = KANSAS	5	NJ = NEW	JERSEY	VT = VERMONT
AR =	ARKANSAS	KY = KENTUC	CKY	NM = NEW	MEXICO	WA = WASHINGTON
AZ =	ARIZONA	LA = LOUISIA	NA	NV = NEV	ADA	WI = WISCONSIN
CO =	COLORADO	MA = MASSA	CHUSETTS	NY = NEW	YORK	WV = WEST VIRGINIA
	CONNECTICUT		AND	OH = OHIC		WY = WYOMING
	DIST. OF	ME = MAINE			AHOMA	
	DLUMBIA	MI = MICHIGA		OR = OREC		91 = CANADA
	DELAWARE	MN = MINNES			ISYLVANIA	92 = MEXICO
	FLORIDA	MO = MISSOU		RI = RHOD	DE ISLAND	93 = OTHER
	GEORGIA	MS = MISSISS		SC = SOUT	TH CAROLINA	COUNTRIES
	HAWAII	MT = MONTA			TH DAKOTA	94 = GUAM
	IOWA	NB = NEBRAS		TN = TENN	NESSEE	95 = PUERTO RICO 96 = VIRGIN ISLANDS
ID = I	IDAHO	NC = NORTH		TX = TEXA	10	70 - VIROIT IDEATIDE
	LLINOIS		DAKOTA	UT = UTAI		97 = CUBA
	109-110 111	2 1	- N		ANK)E OF CERTIFIER C	
23.	111	1	N 	111	E OF CERTIFIER C	/Г DIK I П
				CODE	CERTIFIER BIRT	'H
				1	PHYSICIAN/M.D	
				2	DR. OSTEOPATH	IY
				3	CERTIFIED MID	WIFE
				4	R.N./PHYSICIAN	'S ASSISTANT
				5	OTHER MIDWIF	Е
				6	OTHER	
				9	UNKNOWN OR U	JNATTENDED
26.	112	1	A	MAF	RITAL STATUS OF	MOTHER (Live Birth Only)
				CODE	<u>STATUS</u>	
				1	MARRIED	
				2	UNMARRIED	
				9	UNKNOWN	
27.	113-118	6	A	CEN	SUS TRACT OF MO	OTHER'S RESIDENCE
				CON	TACT INDIVIDUA	L COUNTIES FOR DETAI
28.	119-120	2	N	AGE	OF FATHER	
				2 DI	GIT NUMERIC	
					NOT STATED	
29.	121-122	2	N	FAT	HER'S YEARS OF I	EDUCATION
				<u>CODE</u>	<u>LEVEL</u>	
				00	NO EDUCATION	

				FIELD NAME AND DESCRIPTION
				01-12 ELEMENTARY OR SECONDARY 13 1 YEAR OF COLLEGE 14 2 YEARS OF COLLEGE 15 3 YEARS OF COLLEGE 16 4 YEARS OF COLLEGE 17 5+ YEARS OF COLLEGE 99 UNKNOWN OR NOT AVAILABLE
30.	123-124	2	N	RACE-ETHNICITY OF FATHER
20 = 30 = 40 = 41 = 42 = 43 = 44 = 44 = 45	WHITE BLACK AMERICAN INDIA ASIAN-UNSPECIFI ASIAN-SPECIFIED ASIAN-CHINESE ASIAN-JAPANESE ASIAN-KOREAN ASIAN-VIETNAME 125	ED	52 = INDIAN (EXCI ALEUT & ESK 53 = FILIPINO	56 = SAMOAN 57 = ESKIMO 58 = ALEUT FIED 59 = PACIFIC ISLANDER (EXCL. HAWAIIAN,
32.	126-132	7	A	DATE OF CHILD'S DEATH (CYYMMDD) (On Birth Certificate)
				BLANK = NO DATE ENTERED C = CENTURY CODE 9 ONLY YY = YEAR CODES 99, 00 (FOR 1999 and 200 MM = MONTH CODES 01-12 (JAN-DEC) DD = DAY CODES 01-31
33.	133-136	4	N	DATE OF BIRTH REGISTRATION (YYMM)
				YY = YEAR CODES 99, 00 (FOR 1999 and 2000) MM = MONTH CODES 01-12 (JAN-DEC)
34.	137-142	6	A	DATE OF LAST MENSES (YYMMDD)
				BLANK = NOT REPORTED YY = 2 DIGIT NUMERIC MM = 01-12 (JAN-DEC) DAY = 00-31
35.	143-145	3	A	LENGTH OF GESTATION (IN DAYS)
				3 DIGIT NUMERIC BLANK = NOT REPORTED 999 = GESTATION LENGTH 1000 DAYS OR GREATER
36.	146	1	A	MONTH PRENATAL CARE BEGAN

FIELD NO.	RECORD POSITION(S)	NO. OF BYTES	ALPHA/ NUMERIC	FIELD NAME AND DESCRIPTION
				CODE MONTH BEGAN 0 NO PRENATAL CARE 1-8 FIRST - EIGHTH MONTH 9 NINTH MONTH OR LATER - UNKNOWN OR UNREPORTED
37.	147-148	2	N	NUMBER OF PRENATAL CARE VISITS
				2 DIGIT NUMERIC (00-99) 00 = NONE 99 = UNKNOWN OR UNREPORTED
38.	149-152	4	-	(BLANK)
39.	153-154	2	N	LIVE BIRTHS NOW LIVING
				2 DIGIT NUMERIC (00-99) 98 = NOT STATED 99 = UNKNOWN
40.	155-156	2	N	LIVE BIRTHS NOW DECEASED
				2 DIGIT NUMERIC (00-99) 98 = NOT STATED 99 = UNKNOWN
41.	157-158	2	N	TOTAL CHILDREN BORN ALIVE
				2 DIGIT NUMERIC (01-99) 99 = UNKNOWN
42.	159-160	2	N	TERMINATIONS BEFORE 20 WEEKS
				2 DIGIT NUMERIC (00-99) 98 = NOT STATED 99 = UNKNOWN
43.	161-162	2	N	TERMINATIONS 20 WEEKS PLUS
				2 DIGIT NUMERIC (00-99) 98 = NOT STATED 99 = UNKNOWN
44.	163-164	2	N	TOTAL CHILDREN EVER BORN
				2 DIGIT NUMERIC (01-99) 99 = NOT STATED
45.	165-168	4	A	DATE OF LAST LIVE BIRTH (YYMM)

FIELD NO.	RECORD POSITION(S)	NO. OF BYTES	ALPHA/ NUMERIC	FIELD NAME AND DESCRIPTION
46.	169-172	4		BLANK = NONE YY = YEAR CODE MM = MONTH CODES 01-12 (JAN-DEC) (BLANK)
40.	109-172	4	-	(BLAINK)
47.	173-176	4	A	DATE OF LAST TERMINATION (YYMM)
				BLANK = NONE YY = YEAR CODE MM = MONTH CODES 01-12 (JAN-DEC)
48-51.	177-188	16	-	(BLANK)
51.	193-224	32	N	COMPLICATION OF PREGNANCY (APPENDIX B: "Certificate of Live Birth – Medical Data Supplemental Work Sheet," VS 10A, Rev. 1/90)
				16 TWO DIGIT FIELDS, (00-30,99) LEFT JUSTIFIED WITH TRAILING BLANKS FIRST CODE ONLY INCLUDES: 00 = NONE 99 = UNKNOWN OR UNREPORTED CODE COMPLICATION/PROCEDURE 00 None 01 Pre-eclampsia (pregnancy induced hypertension) 02 Eclampsia (convulsions of coma) 03 Hypertension, chronic 04 Renal disease 05 Pyelonephritis 06 Anemia (hct.<30 and/or hgb.<10) 07 Cardiac disease 08 Lung disease, acute or chronic 09 Diabetes 10 Rh sensitive 11 Hemoglobinopathy 12 Uterine bleeding before labor 13 Polyhydramnios/oligohydramnios 14 Incompetent cervix (with or without cerclage) 15 Premature labor 16 Genital herpes 17 Other sexually transmitted diseases 18 Hepatitis B (acute infection or carrier) 19 Rubella 20 Tobacco use during pregnancy

NO.	POSITION(S)	BYTES	NUMERIC	FIELD NAME AND DESCRIPTION
				Codes 21, 22, and 23 apply to any previous live birth or fetal death (single or multiple):
				21 >=4000 grams birthweight 22 <2500 grams birthweight
				23 <37 weeks gestation
				24 Cervical cerclage
				25 Chorionic villus sampling
				26 Amniocentesis
				27 Electronic fetal monitoring28 Tocolysis
				29 Ultrasound
				30 Other
				99 Unknown or Not Reported
52.	225-242	18	N	COMPLICATION LABOR/DELIVERY
				(APPENDIX B: "Certificate of Live Birth – Medical Data
				Supplemental Work Sheet," VS 10A, Rev. 1/90)
				9 TWO DIGIT FIELDS, (00-31,99)
				LEFT JUSTIFIED WITH TRAILING BLANKS
				FIRST CODE ONLY INCLUDES:
				00 = NONE
				99 = UNKNOWN OR UNREPORTED
				CODE COMPLICATION LABOR/DELIVERY
				00 None
				O1 Preeclampsia (pregnancy induced hypertension)
				02 Eclampsia (convulsions or coma)
				03 Seizure during labor
				64 Fetopelvic disproportion65 Shoulder dystocia
				06 Breech or other abnormal presentation
				07 Precipitous labor (< 3 hours)
				08 Prolonged labor (>20 hours)
				09 Other dysfunctional labor
				Premature rupture of membrane (> 12 hours)
				11 Induction of labor
				12 Stimulation of labor 13 Abruptio placenta
				13 Abruptio placenta14 Placenta previa
				15 Other excessive bleeding
				16 Genital herpes
				17 Amnionitis/sepsis
				18 Febrile (> 100° F. or > 38° C.)
				19 Presence of meconium, moderate/heavy
				20 Cord prolapse
				21 Fetal distress

POSITION(S)			
			22 Anesthetic complications 23 Unsuccessful attempt at vaginal birth after cesarean
			section 24 Maternal blood transfusion
			 Maternal blood transfusion Transport of mother from another facility prior to
			delivery
			26 Amniocentesis
			27 Electronic fetal monitoring 28 Tocolysis
			28 Tocolysis 29 Ultrasound
			30 Maternal death (within 72 hours of delivery)
			31 Other
			99 Unknown or Not Reported
243-262	20	N	ABNORMAL CONDITIONS
			(APPENDIX B: "Certificate of Live Birth – Medical Dat Supplemental Work Sheet," VS 10A, Rev. 1/90)
			10 TWO DIGIT FIELDS, (00-75,99) LEFT JUSTIFIED WITH TRAILING BLANKS
			LEFT JUSTIFIED WITH TRAILING BLANKS
			FIRST CODE ONLY INCLUDES:
			00 = NONE 99 = UNKNOWN OR UNREPORTED
263-272	10	_	(BLANK)
273-276	4	N 	HOUR OF BIRTH (HHMM)
			0001-2400 = TIME OF BIRTH
			9999 = UNKNOWN OR UNREPORTED
277-284	8	A	MOTHER'S FIRST NAME
			BLANK = UNKNOWN OR NOT STATED
285	1	N	HISPANIC ORIGIN CODE OF FATHER
			<u>CODE ORIGIN</u>
			1 NOT SPANISH/HISPANIC
			2 MEXICAN/MEXICAN-AMERICAN/CHICANO
			3 PUERTO RICAN 4 CUBAN
			5 CENTRAL/SO. AMERICAN
			6 OTHER SPANISH/HISPANIC (BORN
			OUTSIDE U.S.)
			7 CODE NOT USED8 OTHER SPANISH/HISPANIC (BORN
	243-262 263-272 273-276	243-262 20 263-272 10 273-276 4 277-284 8	243-262 20 N 263-272 10 - 273-276 4 N 277-284 8 A

TELD NO.				FIELD NAME ANI DESCRIPTION)
				IN THE U.S.) 9 UNKNOWN OF	R UNREPORTED
58.	286	1	N	HISPANIC ORIGIN C	ODE OF MOTHER
				3 PUERTO RICAL 4 CUBAN 5 CENTRAL/SO. 6 OTHER SPANIS OUTSIDE U.S.) 7 CODE NOT US 8 OTHER SPANIS IN THE U.S.)	XICAN-AMERICAN/CHICAN(N AMERICAN SH/HISPANIC (BORN
59.	287-291	5	A	MOTHER'S RESIDEN 5 DIGIT NUMERIC	TTIAL ZIP CODE
02 = A 03 = A 04 = A 05 = C 06 = C 07 = C 08 = D CO 10 = F 11 = G 12 = H 13 = H	292-293 LABAMA LASKA RIZONA RKANSAS ALIFORNIA OLORADO ONNECTICUT ELAWARE EIST. OF LUMBIA LORIDA EORGIA AWAII DAHO LLINOIS	18 = KENTUCKY 19 = LOUISIANA 20 = MAINE	O USETTS A I	STATE OF RESIDENO 30 = NEW HAMPSHIRE 31 = NEW JERSEY 32 = NEW MEXICO 33 = NEW YORK 34 = NORTH CAROLINA 35 = NORTH DAKOTA 36 = OHIO 37 = OKLAHOMA 38 = OREGON 39 = PENNSYLVANIA 40 = RHODE ISLAND 41 = SOUTH CAROLINA 42 = SOUTH DAKOTA 43 = TENNESSEE 44 = TEXAS	CE OF MOTHER 45 = UTAH 46 = VERMONT 47 = VIRGINIA
61.	294-296	3	N		DE MOTHER'S RESIDENCE graphic Codes – City For 1999," E\10-99\SLF
				3 DIGIT NUMERIC	

FIELD NO.	RECORD POSITION(S)	NO. OF BYTES	ALPHA/ NUMERIC	FIELD NAME AND DESCRIPTION
				TO OBTAIN A UNIQUE CENSUS PLACE CODE BOTH THE STATE OF RESIDENCE (FIELD 60) AND THE CENSUS PLACE CODE MUST BE PRESENT.
62.	297-304	8	-	(BLANK)
63.	305	1	N	TYPE OF EVENT
				1 = LIVE BIRTH 2 = FETAL DEATH
64.	306-307	2	N	YEAR OF EVENT
				99 = ONLY VALID ENTRY
65.	308-309	2	N	BIRTH LOCAL REGISTRATION DISTRICT
				CODE BIRTH DISTRICT 00 OUT OF STATE 01-58 CALIFORNIA COUNTIES 61 BERKELEY CITY 62 LONG BEACH CITY 63 PASADENA CITY
66-67.	310-332	23	-	(BLANK)
68.	333-339	7	A	FATHER'S DATE OF BIRTH (CYYMMDD)
				BLANK = UNKNOWN OR UNREPORTED C = CENTURY CODE 9 ONLY YY = YEAR CODES MM = MONTH CODES 01-12 (JAN-DEC) DD = DAY CODES 01-31
69.	340-347	8	-	(BLANK)
70.	348-354	7	A	MOTHER'S DATE OF BIRTH (CYYMMDD)
				BLANK = UNKNOWN OR UNREPORTED C = CENTURY CODE 9 ONLY YY = YEAR CODES MM = MONTH CODES 01-12 (JAN-DEC)

FIELD NO.	RECORD POSITION(S)	NO. OF BYTES	ALPHA/ NUMERIC	DESCRIPTION
				DD = DAY CODES 01-31
71.	355-362	8	-	(BLANK)
72.	363-365	3	A	METHOD OF DELIVERY (APPENDIX B: "Certificate of Live Birth – Medical Data Supplemental Work Sheet," VS 10A, Rev. 1/90)
				UP TO 3 CODES ALLOWED. ALLOWABLE CODE COMBINATIONS ARE:
				3 AND 4 4 AND 5 4 AND 6 5 AND 6 4, 5, AND 6
				<u>CODE</u> <u>METHOD</u>
				BLANK UNKNOWN OR UNREPORTED CESAREAN SECTION - PRIMARY CESAREAN SECTION - REPEAT VAGINAL BIRTH - SPONTANEOUS VAGINAL BIRTH - AFTER PREVIOUS C-SECTION VAGINAL BIRTH - FORCEPS VAGINAL BIRTH - VACUUM CESAREAN UNSPECIFIED (OUT-OF-STATE)
73.	366-367	2	N	PRINCIPAL SOURCE OF PAYMENT FOR PRENATAL CARE (APPENDIX B: "Certificate of Live Birth – Medical Data Supplemental Work Sheet," VS 10A, Rev. 1/90)
				<u>CODE</u> <u>SOURCE</u>
				 N/A or none Medicare Medi-Cal (except CPS Program) Worker's compensation Title V (MCH funds) Other government programs Blue Cross/Blue Shield Private insurance company

FIELD NO.	RECORD POSITION(S)	NO. OF BYTES	ALPHA/ NUMERIC	FIELD NAME AND DESCRIPTION	
				08	Health maintenance organization/prepaid health
				09	plan Self pay
				10	No charge
				11	Other nongovernment programs
				12	Medically indigent
				13	Medi-Cal CPS Program
				99	Unknown
74.	368-369	2	N	EXP	ECTED PRINCIPAL SOURCE OF
				PAY	MENT FOR DELIVERY
					PENDIX B: "Certificate of Live Birth – Medical Data
				Supp	lemental Work Sheet," VS 10A, Rev. 1/90)
				<u>CODE</u>	SOURCE
				00	N/A, none, or medically unattended birth
				01	Medicare
				02	Medi-Cal
				03	Worker's compensation
				04	Title V (MCH)
				05 06	Other governmental programs Blue Cross/Blue Shield
				07	Private insurance company
				08	Health maintenance organization/prepaid health plan
				09	Self pay
				10	No charge
				11	Other non-government programs
				12	Medically indigent
				99	Unknown
75.	370	1	N	PLA	NNED BIRTHPLACE
				CODE	PLANNED BIRTHPLACE
				1	HOSPITAL
				2	BIRTH CENTER
				3	RESIDENCE
				4	UNPLANNED
				5	OTHER
				9	UNKNOWN

NOTE: POSITIONS 371 – 426 INCLUDE DEATH INFORMATION

(Unless otherwise noted, Items 76-95 apply to Infant Deaths Only)

FIELD NO.	RECORD POSITION(S)	NO. OF BYTES	ALPHA/ NUMERIC	Fl	IELD NAME AND DESCRIPTION
76.	371-378	8	N	DAT	E OF DECEDENT'S DEATH (CYYMMDD)
				CC YY MM	 LIVE BIRTH SURVIVED FIRST YEAR OR FETAL DEATH CENTURY CODE 19, 20 YEAR CODE 99, 00 (FOR 1999 and 2000) MONTH CODES 01-12 (JAN-DEC) DAY CODES 01-31
77.	379-381	3	A	AGE	OF DECEDENT (CUU)
				AGE	GROUP UNITS WITHIN GROUP
				CODE	<u>UNITS/TYPE</u>
78.	382	1	N	(INF.	100 PLUS YEARS 01-99 YEARS 01-11 MONTHS 01-27 DAYS 01-23 HOURS 01-59 MINUTES 99 UNKNOWN < 1 YEAR OLD XX FETAL DEATH LIVE BIRTH SURVIVED FIRST YEAR TH REPORTED TO CORONER ANT DEATH AND FETAL DEATH)
				CODE 1 2 9 BLANK	REPORTED YES NO UNKNOWN LIVE BIRTH SURVIVED FIRST YEAR
79.	383	1	N	BIOI	PSY PERFORMED ON DECEDENT
				CODE 1 2 9 BLANK	REPORTED YES NO UNKNOWN LIVE BIRTH SURVIVED FIRST YEAR OF LIF OR FETAL DEATH
80.	384	1	N	AUT	OPSY PERFORMED ON DECEDENT

FIELD NO.	RECORD POSITION(S)	NO. OF BYTES	ALPHA/ NUMERIC		FIELD NAME AND DESCRIPTION
				(IN	FANT DEATH AND FETAL DEATH)
				CODE	REPORTED
				1	YES
				2 9	NO UNKNOWN
				BLANK	
81.	385	1	N	OP	ERATION PERFORMED PRIOR TO DEATH
				CODE	REPORTED
				1	YES
				2	NO
				9	UNKNOWN
				BLANK	LIVE BIRTH SURVIVED FIRST YEAR OF LIFE OR FETAL DEATH
82.	386	1	N	TY	PE OF FACILITY WHERE DECEDENT DIED
	-			CODE	TYPE FACILITY
				1	STATE LICENSED GENERAL, EXCEPT COUNTY
				2 3	STATE LICENSED GENERAL COUNTY STATE MENTAL
				4	ALL FACILITIES IDENTIFIED AS NURSING
					HOMES, REST HOMES, REST HOMES,
					CONVALESCENT HOMES, SANITARIA, etc.
				5	ALL OTHER FACILITIES
				6 7	DEAD ON ARRIVAL AT ANY FACILITY CODE NOT USED
				8	HOME
				9	NOT A CALIFORNIA FACILITY
				BLANK	LIVE BIRTH SURVIVED FIRST YEAR OF LIFE OR FETAL DEATH
83.	387	1	A	DE	ATH IN HOSPITAL
				CODE	<u>IN HOSPITAL</u>
				1	INPATIENT (IP)
				2 3	EMERGENCY/OUTPATIENT (ER/OP) DEAD ON ARRIVAL (DOA)
				9	UNKNOWN
				BLANK	INAPPLICABLE/NON-HOSPITAL OR LIVE
					BIRTH SURVIVED FIRST YEAR OF LIFE OR
					FETAL DEATH

FIELD NO.	RECORD POSITION(S)			FIELD NAME AND DESCRIPTION	
84.	388	1	N	TYPE OF CERTIFIER OF DEATH	
				CODE CERTIFIER 1 CORONER 2 M.D. OR D.O. 3 CHIROPRACTOR (D.C.) 4 MILITARY CERTIFIER 5 APPARENT CORONER CASE CERTIFIED BY BY M.D., D.O., OR D.C. 9 UNKNOWN BLANK LIVE BIRTH SURVIVED FIRST YEAR OF LIFE OR FETAL DEATH	
85.	389-393	5	A	UNDERLYING CAUSE OF DEATH (Source: WHO, <u>International Classification of Diseases and Related Health Problems</u> , 10 th Revision, 1992)	
				(INFANT DEATH AND FETAL DEATH)	
				INCLUDES 4 TH DIGIT SUBCATEGORIES BLANK = LIVE BIRTH SURVIVED FIRST YEAR OF LIFE	
86.	394-396	3	N	GROUP CAUSE OF DEATH CODE (APPENDIX D: "Group Cause of Death Codes," Tenth Revision ICD, Rev. 11/7/2000)	
				BLANK = LIVE BIRTH SURVIVED FIRST YEAR OF LIFE OR FETAL DEATH	
87.	7. 397-399 3 N		N	INFANT GROUP CAUSE OF DEATH CODE (APPENDIX E: Selected Group Causes of Infant Deaths," Tenth Revision ICD, Rev. 11/8/00)	
				BLANK = LIVE BIRTH SURVIVED FIRST YEAR OF LIFE OR FETAL DEATH	
88.	400	1	N	HISPANIC ORIGIN OF DECEDENT	
				<u>CODE</u> <u>ORIGIN</u>	
				 NOT SPANISH/HISPANIC MEXICAN/MEXICAN-AMERICAN/CHICANO PUERTO RICAN CUBAN CENTRAL/SO. AMERICAN OTHER SPANISH/HISPANIC (BORN OUTSIDE U.S.) CODE NOT USED OTHER SPANISH/HISPANIC (BORN 	

	POSITION(S)	BYTES	NUMERIC	FIELD NAM DESCRIF	PTION		
				IN THE 9 UNKNO BLANK LIVE BI	U.S.) WN OR UNREPORTED RTH SURVIVED FIRST YEAR OF LIF AL DEATH		
89.	401-406	6	-	(BLANK)			
90.	407-408	2		RACE-ETHNIC			
40 = A $41 = A$ $42 = A$ $43 = A$ $44 = A$)	46 = ASIAN-CA 47 = ASIAN-TH 48 = ASIAN-LA 51 = OTHER-SI 52 = INDIAN (I	AMBODIAN IAI AOTIAN57 = ESKIMO PECIFIED EXCL. AMER INDIAN I & ESKIMO)	55 = GUAMANIAN 56 = SAMOAN 58 = ALEUT 59 = PACIFIC ISLANDER (EXCL. HAWAIIAN, GUAMANIAN, SAMOAN) 98 = REFUSED TO STATE 99 = UNKNOWN		
91.	409-410	2	A	PLACE OF DE	CEDENT'S RESIDENCE		
			BLANK = LIVE BIRTH SURVIVED FIRST LIFE OR FETAL DEATH				
		CALIFO	RNIA COUNTY				
02 = A 03 = A 04 = B 05 = C 06 = C 07 = C 08 = D 09 = E 10 = Fl 11 = G 12 = H	ALAVERAS OLUSA ONTRA COSTA OEL NORTE L DORADO RESNO ELENN IUMBOLDT MPERIAL	17 = LAI 18 = LAS 19 = LOS 20 = MA 21 = MA 22 = MA 23 = ME 24 = ME 25 = MO 26 = MO 27 = MO 28 = NAI 29 = NE	KE SSEN S ANGELES DERA RIN RIPOSA NDOCINO RCED DOC NO NTEREY PA VADA	35 = SAN BENITO	47 = SISKIYOU 48 = SOLANO 49=SONOMA 50 = STANISLAUS DINO 51 = SUTTER 52 = TEHAMA CO 53 = TRINITY 54 = TULARE SPO 55 = TUOLUMNE 56 = VENTURA ARA 57 = YOLO		
				OF RESIDENCE CODE DING CA), TERRITORI	S FOR ES, FOREIGN COUNTRIES:		
		= INDIANA = KANSA		NH = NEW HAMPSH NJ = NEW JERSEY	HIRE VA = VIRGINIA VT = VERMONT		

FIELD RECORD NO. O NO. POSITION(S) BYTE							
AR = ARKANSAS AZ = ARIZONA CO = COLORADO CT = CONNECTICUT DC = DIST. OF COLUMBIA DE = DELAWARE FL = FLORIDA GA = GEORGIA HI = HAWAII IA = IOWA ID = IDAHO		KY = KENTUC LA = LOUISIA MA = MASSAC MD = MARYL ME = MAINE MI = MICHIGA MN = MINNES MO = MISSOU MS = MISSISSI MT = MONTAI NB = NEBRAS NC = NORTH O	EKY NA CHUSETTS AND OTA RI IPPI NA KA CAROLINA	NM = NEW MEXICO NV = NEVADA NY = NEW YORK OH = OHIO OK = OKLAHOMA OR = OREGON PA = PENNSYLVANIA RI = RHODE ISLAND SC = SOUTH CAROLINA SD = SOUTH DAKOTA	WA = WASHINGTON WI = WISCONSIN WV = WEST VIRGINIA WY = WYOMING 91 = CANADA 92 = MEXICO 93 = OTHER COUNTRIES		
92.	411-412	2	A	PLACE WHERE DEA	TH OCCURRED		
				X = LIVE BIRTH SURVIVED F			
			RNIA COUNT	Y CODES:			
03 = AMADOR 04 = BUTTE 05 = CALAVERAS 06 = COLUSA 07 = CONTRA COSTA 08 = DEL NORTE		17 = LAK 18 = LAS 19 = LOS 20 = MAI 21 = MAI 22 = MAI 23 = MEI 24 = MEI 25 = MOI 26 = MOI 27 = MOI 28 = NAI 29 = NEV 30 = ORA	EE SEN ANGELES DERA RIN RIPOSA NDOCINO RCED DOC NO NTEREY PA ANGE	31 = PLACER 32 = PLUMAS 33 = RIVERSIDE 34 = SACRAMENTO 35 = SAN BENITO 36 = SAN BERNARDINO 37 = SAN DIEGO 38 = SAN FRANCISCO 39 = SAN JOAQUIN 40 = SAN LUIS OBISPO 41 = SAN MATEO 42 = SANTA BARBARA 43 = SANTA CLARA 44 = SANTA CRUZ 45 = SHASTA	46 = SIERRA 47 = SISKIYOU 48 = SOLANO 49 = SONOMA 50 = STANISLAUS 51 = SUTTER 52 = TEHAMA 53 = TRINITY 54 = TULARE 55 = TUOLUMNE 56 = VENTURA 57 = YOLO 58 = YUBA		
AL = A AR = A AZ = A CO = C CT = C DC = I	ALASKA ALABAMA ARKANSAS ARIZONA COLORADO CONNECTICUT DIST. OF COLUMBIA DELAWARE FLORIDA	IN = INDI KS = KAN KY = KEN LA = LOU MA = MA MD = MA ME = MA MI = MIC	ANA ISAS ITUCKY IISIANA SSACHUSETT RYLAND INE HIGAN NNESOTA	NH = NEW HAMPSHIRE NJ = NEW JERSEY NM = NEW MEXICO NV = NEVADA	VA = VIRGINIA VT = VERMONT		

FIELD NO.	RECORD POSITION(S)		ALPHA/ NUMERIC		IELD NAME AND DESCRIPTION	
					OUTH CAROLINA	
					OUTH DAKOTA	
IA = Ic	OWA	NB = NE	BRASKA	TN = 7	ΓENNESSEE	95 = PUERTO RICO
ID = I	DAHO	NC = NO	RTH CAROLINA	TX = T	ΓEXAS	96 = VIRGIN ISLANDS
IL = II	LLINOIS	ND = NO	RTH DAKOTA	UT = U	JTAH	97 = CUBA
93.	413-414	2	N	DEA	TH LOCAL REGIST	RATION DISTRICT
				CODE	DEATH DISTRICT	
				00	OUT OF STATE	
				01-5	8 CALIFORNIA COU	INTIES
				61	BERKELEY CITY	
				62	LONG BEACH CIT	Ϋ́
				63	PASADENA CITY	
			В	BLANK	LIVE BIRTH SURV	VIVED FIRST YEAR OF LIF
					OR FETAL DEATH	I
, , , ,	415-426 H LOCAL REGIST		- BER	(BLA	.NK)	

SOURCE: State of California, Department of Health Services, Vital Statistics Section, "1999 California Birth Tape File Documentation," "1999 California Death Tape File Documentation," and "1999 California Fetal Death File Documentation," Revised March 29, 2002.